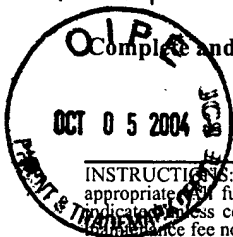


PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: **Mail**

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7590

07/01/2004

Don W. Bulson, Esq.
 RENNER, OTTO, BOISSELLE & SKLAR, LLP
 Nineteenth Floor
 1621 Euclid Avenue
 Cleveland, OH 44115-2191

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Jennifer A. Moore	(Depositor's name)
<i>Jennifer A. Moore</i>	(Signature)
October 1, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/083,041	02/26/2002	Stefan Vilsmeier	SCHWP0110USB	3241

TITLE OF INVENTION: NEURO-NAVIGATION SYSTEM

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES NO	\$665 \$1370	\$300	\$965 \$1670	10/01/2004
EXAMINER	ART UNIT	CLASS-SUBCLASS			
JAWORSKI, FRANCIS J	3737	600-407000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Renner, Otto, Boisselle
 & Sklar, LLP
 2
 3

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

BrainLAB AG

Kirchheim/Heimstetten, Germany

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

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10-1-04

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